

PART B - FEE(S) TRANSMITTAL

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34645 7599 10/06/2009

Anderson Gorecki & Manaras, LLP
 Attn: John C. Gorecki
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<i>Christine Morrisette</i> <i>Christine Morrisette</i> <i>November 4, 2009</i>	(Depositor's name) (Signature) (Date)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/0678,705	10/03/2003	Ramesh Durairaj	15990SSUS01U	9889

TITLE OF INVENTION: METHOD AND APPARATUS FOR INTELLIGENT MANAGEMENT OF A NETWORK ELEMENT

APPLN	TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1510	\$0	\$0	\$1510	01/06/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS				
		CHEA, PHILIP J	2453 709-223000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.							
2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recording as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Nortel Networks Limited

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

St. Laurent, Quebec, Canada

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **14315** (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

John C. Gorecki

Date

11-4-09

Typed or printed name

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38,471

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